



DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF WATER SUPPLY

Appendix G

**WELLHEAD PROTECTION CHECKLIST
FOR SMALL COMMUNITY & NONCOMMUNITY SUPPLIES**

Complete all parts of this checklist. Enter "N/A" if an answer is unknown or if an item is not applicable.

General Information

1. Small Water System or Church Name: _____
2. System or Church Mailing Address: _____

3. PWSID#: _____
4. Phone: (____) _____
5. Primary Contact: _____
(person responsible for water quality)
6. Directions to your location: _____

Well or Spring Information

7. Number of wells or springs: _____
8. Approximate year drilled: _____
9. Driller's name: _____
10. Depth of each well: _____
11. Number of people served by wells or springs: _____
12. Estimate the amount of water used each month: _____
13. How is the water used? _____
14. Topographic quadrangle map name: _____
15. Are well logs available for the wells? YES _____ NO _____
If yes, include a copy(ies) as part of this report.
16. Is the well inside a wellhouse? YES _____ NO _____
17. Are any chemicals or gasoline stored inside the wellhouse? YES _____ NO _____
If yes, list all which apply: _____
18. Is fertilizer or weedkiller used in the vicinity of the wells? YES _____ NO _____
If yes, list all which apply: _____
19. Estimate the distance from the septic tanks (or field lines) to the water wells (or springs): _____
20. Is the area immediately around the well prone to flooding? YES _____ NO _____
21. Are there any abandoned wells on the property? YES _____ NO _____
If yes, indicate the present condition (sealed, capped, etc.): _____

Wellhead Protection Zones

22. How were Zone 1 (250 ft. radius) and Zone 2 (750 ft. radius) measured (tape, pacing, other)? _____
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23. Are septic tanks buried in the vicinity of the well/spring? YES _____ NO _____
If yes, indicate the following:
Number of tanks: _____
Age of tanks: _____
Distance to nearest well/spring: _____
24. Is heating oil, engine oil or gasoline stored within Zones 1 and 2? YES _____ NO _____
If yes, is there evidence of leaking tanks? YES _____ NO _____
25. What was the land used for before the establishment of the system/church? _____
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26. Are there environmental concerns in the area? YES _____ NO _____
If yes, describe: _____
27. How are the grounds maintained (mowed, other)? _____
28. Are pesticides used within the wellhead protection zone? YES _____ NO _____
If yes, are they stored within the zone? _____
29. Has water quality testing shown any positive bacterial results or chemical detections? YES _____ NO _____
If yes, describe: _____
30. What is the nearest surface water to the well(s) or spring(s)? _____
31. In which direction does surface water run-off flow from the well site(s)? _____
32. Does the well/spring water get cloudy or muddy after heavy rains? YES _____ NO _____

Potential Contaminant Source Inventory

33. Land use within Zones 1 and 2

Agricultural (crop or livestock): _____

Animal Waste Lagoons/Barns: _____

Industrial/Commercial Operations (gas stations/mechanics, manufacturing facilities, paint shops, machine shops, salvage yards, etc.): _____

Is there a cemetery on the property? YES _____ NO _____

If yes, how far is the cemetery from the well(s) or spring(s)? _____

Landfills/Dumps: _____

Other: _____

34. **Geologic Settings**

Sinkholes: _____

Disappearing Streams: _____

35. **Transportation**

Major Highway(s), Railroad(s) or Airport(s): _____

Contingency Planning

Enter agency name and phone number:

36. _____ County Civil Defense Phone: (____) _____

37. _____ County Health Department Phone: (____) _____

38. Tennessee Emergency Management Agency (TEMA) Phone: (____) _____

39. Name of other agency: _____ Phone: (____) _____

Sketch and Photographs of Wells/Springs

40. Include a detailed sketch of the area. (Example is attached.)

41. Regulations require one (1) photograph be taken of the well or spring and eight (8) photographs be taken of the area around each well or spring. Use a magnetic compass to determine the 8 directions around the well/spring (i.e., N, NE, E, etc.). Pictures should show the well/spring in the foreground (bottom of the picture) with the focus on what is behind and beyond the well/spring. Use the attached template for the photographs.

If you have questions concerning this checklist, contact the Division of Water Supply at (615) 532-0191 or 1-800-523-4873.

UPON COMPLETION OF THIS FORM:

1. Submit the original with the original photographs to:

Division of Water Supply
6th Floor, L & C Tower
401 Church Street
Nashville, TN 37243-1549

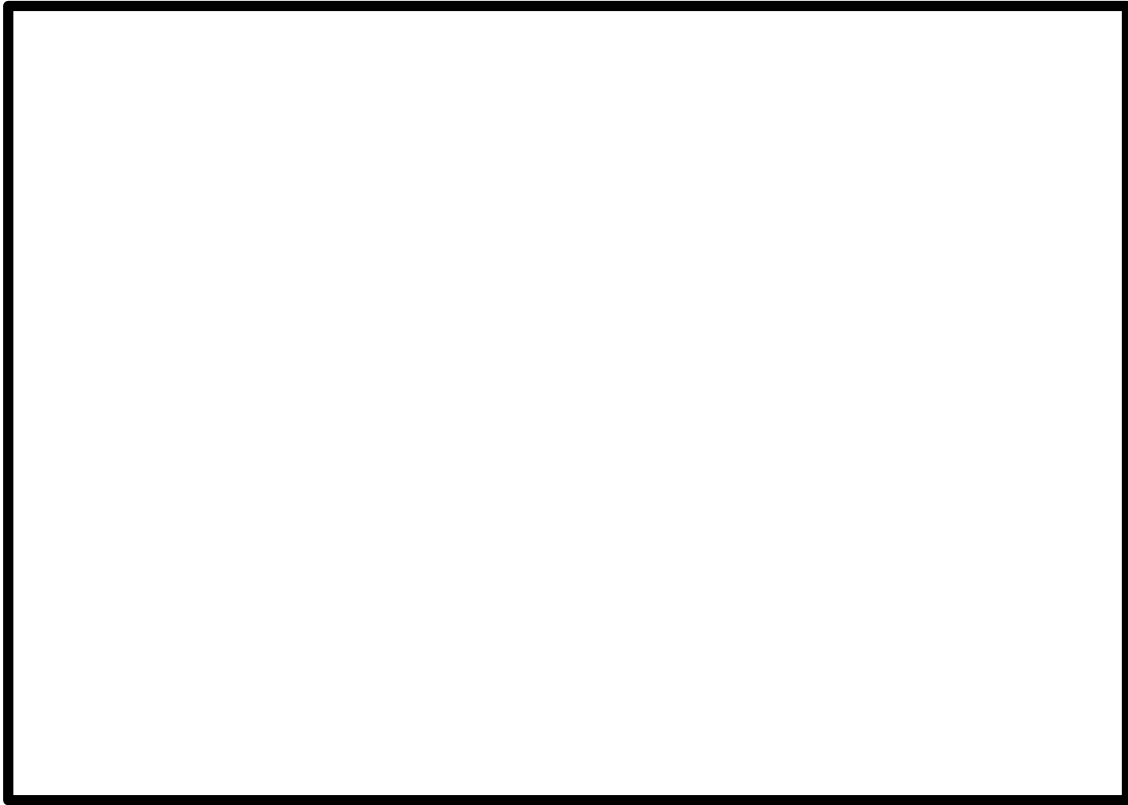
2. Submit a copy to the appropriate Environmental Field Office.
3. Maintain a copy for your records.



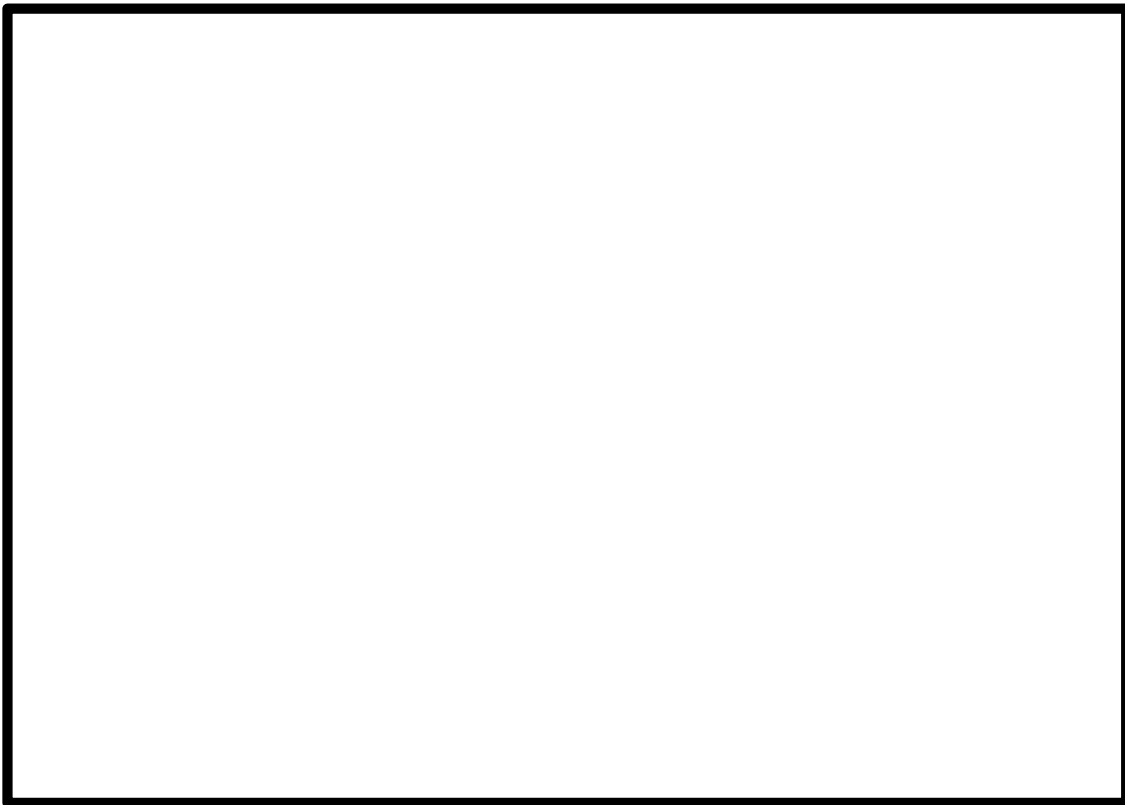
Photograph of Well



Photograph from Well taken to the North



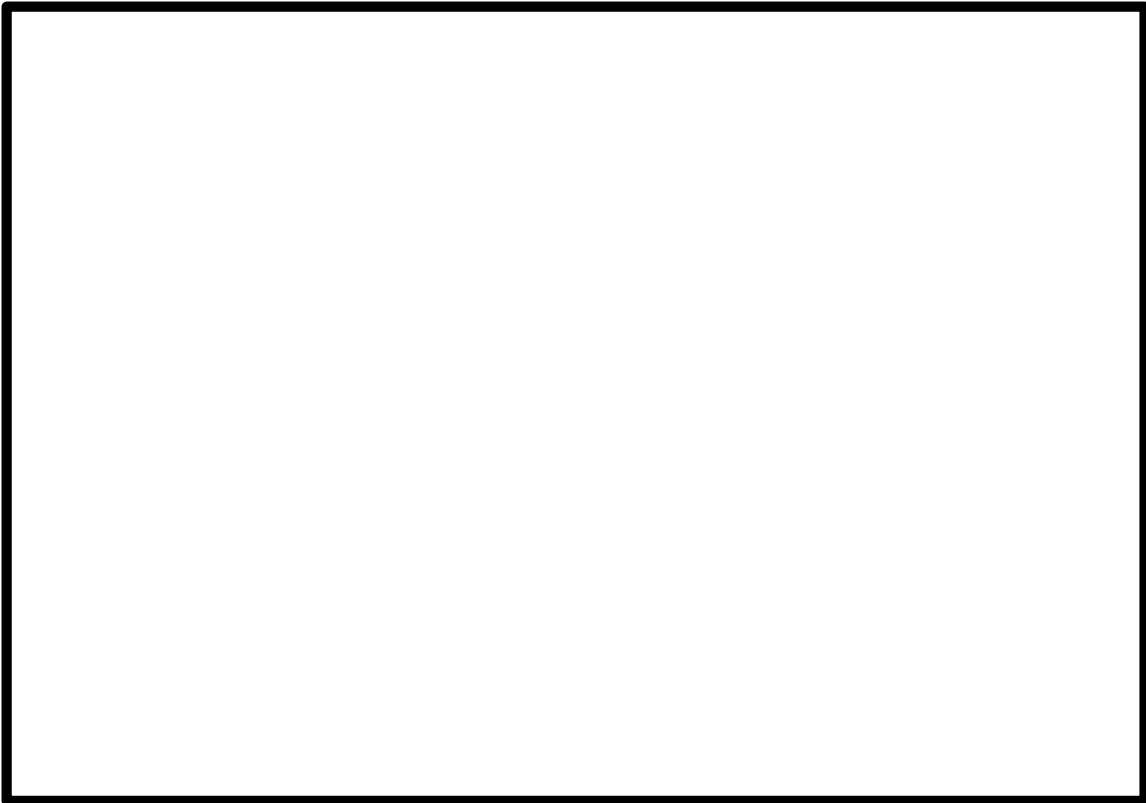
Photograph from Well taken to the Northeast



Photograph from Well taken to the East



Photograph from Well taken to the Southeast



Photograph from Well taken to the South



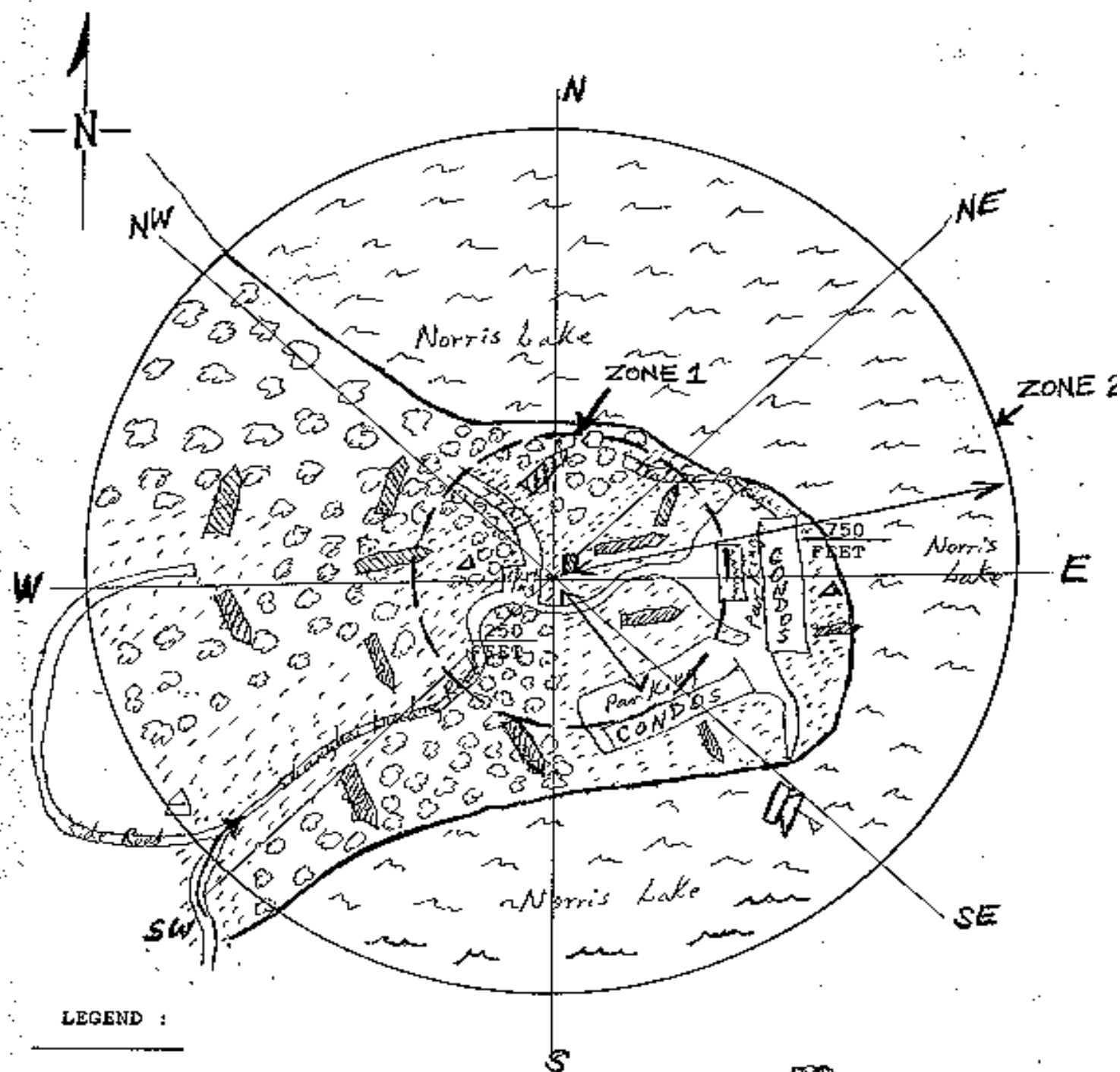
Photograph from Well taken to the Southwest







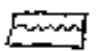
Photograph from Well taken to the West


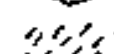

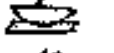




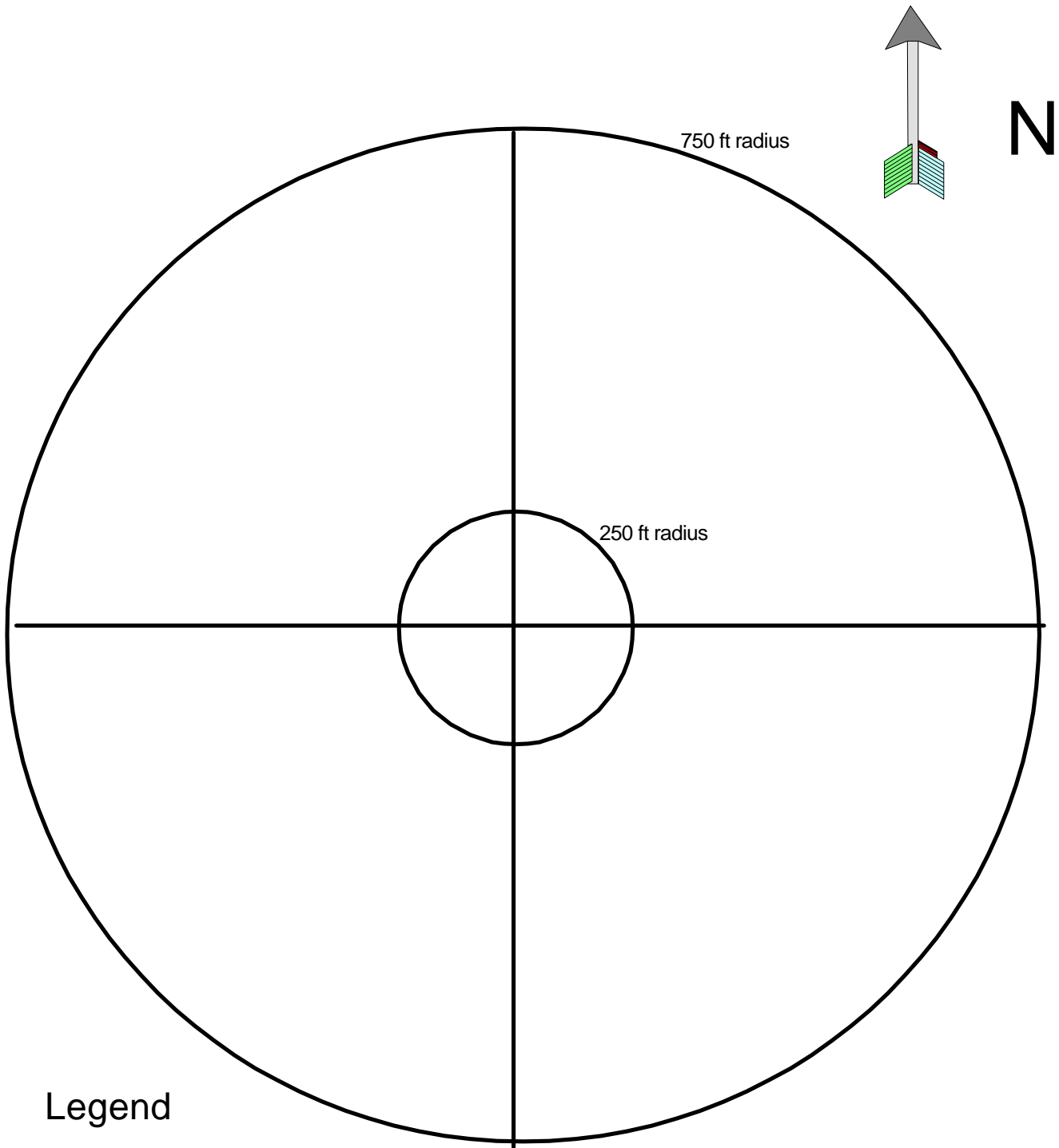
Photograph from Well taken to the Northwest



LEGEND :

-  SURFACE WATER RUN OFF DIRECTION
-  HOUSE (condos) or (house)
-  BUILDING
-  SINKHOLE
-  Swimming Pool

-  FOREST
-  FIELD, GRASS
-  SEPTIC SYSTEM (Litt station)
-  Boat Dock.
-  water (Lake)
-  well House



Legend

House

Building

Sinkhole

Cemetery

Underground utility lines (phone switchgear, electric ...)

Surface Water Runoff Direction

Forest

Field, Grass

Septic System

Surface Water (stream/ lake)